



Monthly Grant Funding-24 Month Rule

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Payment Overview

- What is Monthly Grant Funding (MGF)?
- How is MGF payment determined?
- MGF Payment Process
- MGF Payment Timeline
- MGF Payment Appeal
- MGF Adjustments
- Agency Enrollment Roster



Refresher: Monthly Grant Funding (MGF)?

MHLA makes a payment to agencies when a participant

- Is enrolled with your medical home in the month MGF is calculated

AND

- Has an allowable primary care visit in a prior 24 month period



Monthly Grant Funding (MGF)

MGF rate amount:
The new MGF rate is now
\$32.



New: How is MGF payment determined now?

- Participants' enrollment statuses reported in One-e-App
- Primary care visits reported on encounters submitted to American Insurance Administrator (AIA)
 - Each encounter must meet encounter submission deadlines



MGF Payment Process



MGF Payment Process

Enrollment:

- The MHLA program will get enrollment information from SIS (OEA vendor) the following month.

Enrollment

Encounter Submission

Payment



MGF Payment Process (cont.)

Encounter information:

- You have 60 days from the end of the enrollment month to submit or resubmit claims to AIA.
- AIA will accept your claim after the 60 day period, but your submission will be counted in the next MGF payment.

Enrollment

Encounter Submission

Payment



MGF Payment Process (cont.)

Encounter information – AIA file

- AIA has a file portal where electronic billers have access to track files and retrieve preliminary rejects. This is a good place to check your encounters are submitted.
- AIA will send rejected claims on a weekly basis. This is a new process that will start soon and allow CPs to resubmit rejected claims sooner.

Enrollment

Encounter Submission

Payment



MGF Payment Process (cont.)

Common mistakes when submitting encounters to AIA

- MHLA ID number matches the eligibility file (generated from One-e-App) received by AIA
- First Name, Last Name, DOB and Gender (2 out of 4 must match). Make sure name matches what is in One-e-App
- Encounter visit must be within the eligibility period.
- Combining fiscal year encounters on one claim file or on a paper claim. Note: county's fiscal year is 7/1/xx – 6/30/xx.

Enrollment

Encounter Submission

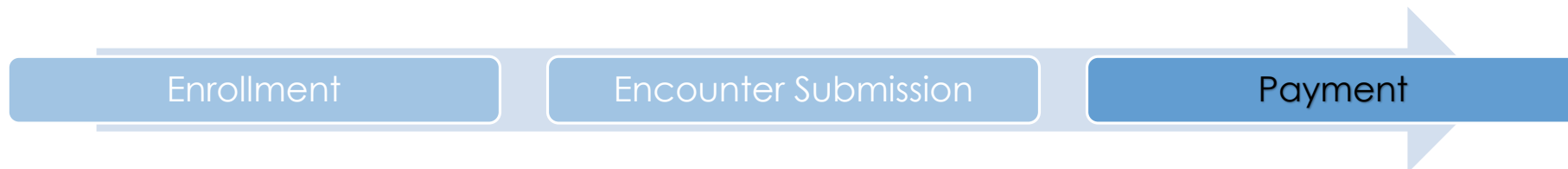
Payment



MGF Payment Process (cont.)

Payment:

- MHLA will process a payment about 4-5 weeks after the encounter submission deadline.



MGF Payment Timeline – July MGF Month

Encounter Data Submission Timeline	July 2019 MGF Month	August 2019	September 2019	October 2019
	MGF Month	Encounter Data Submission Month 1	Encounter Data Submission Month 2	MGF Processing and Payment
<u>Business Rule:</u> CP has 60 days after the last day of the MGF month to submit or resubmit rejected claims.	<p>July is the MGF month</p> <p>CPs: CPs are encouraged to submit encounter claims as soon as possible on behalf of any MHLA patient who had a visit in July.</p>	CPs: CPs should be submitting or resubmitting encounter claims on behalf of MHLA participants who received a visit in July.	<p>CPs: CPs should be submitting or resubmitting encounter claims on behalf of MHLA participants who received a visit in July.</p> <p>9/29/2019 is the deadline to submit/resubmit encounter information for dates of service through 7/31/2019.</p>	<p>DHS will receive from AIA the encounter data file approximately week of 10/7.</p> <p>DHS will process Remittance Advice (R.A.) for July MGF payment to CPs week, to be finalized week of 10/20.</p> <p>CPs receive payment and R.A. outlining payable and non-payable participants enrolled July 2019.</p>
<u>Payment</u>	May 2019 MGF payment is made mid-July	June 2019 MGF payment is made mid-August	July 2019 Part 1 MGF payment is made end of September/early October based on about 50% of July enrollment and confirmed encounters.	July 2019 Part 2 MGF payment is made end of October/early November based on the remaining enrollment and confirmed encounters.

Enterprise Data and Information Management (EDIM) Finance Team

- Provides financial and data support to MHLA
- Uses enrollment data from OEA and encounter data from AIA for MGF payments
- Sends payment information to agencies
 - Remittance Advice (RA) Cover Letter
 - RA Summary Report with breakdown by site/clinic
 - Participant MGF detail (Excel File)



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To ensure access to high-quality,
patient-centered, cost-effective health
care to Los Angeles County residents
through direct services at DHS facilities
and through collaboration with
community and university partners.



www.dhs.lacounty.gov

May 8, 2019

Delivered Via E-mail

(Contact Name), Chief Executive Officer
(Agency Name)

Address
City, State, Zip Code

Dear Sir or Madam

Re: Monthly Grant Funding – Contract #H-XXXXXX
February 2019

Enclosed is a calculated summary of the My Health LA Monthly Grant Funding for enrollees through your agency. The total payment for this month is \$(Amount) for enrollees who had at least one allowable visit in the prior 24 month period, less any applicable assessment fees incurred by your agency and/or any outstanding payments owed by your agency to the County. The County warrant (check) will be sent by separate letter directly from the Los Angeles County Auditor-Controller.

Please call Gary Ye, at (626) 525-5380, if you have questions regarding your monthly grant funding payment or require additional information.

Very truly yours,

Jorge A. Alvidrez
Enterprise Data and Information Management – Finance Team

JA:gy
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05.08.2019\MRE_A Letter 2019 02_Template.doc

Attachment

c: Manal Dudar - DHS Fiscal Services (w/o attachment)
(Contact Name) (Chief Operating Officer)
(Contact Name) (CFO/Fiscal Manager)
(Contact Name) (Billing Contact)

RA Cover Letter

- Specific to each agency
- Total payment for the MGF month
- DHS contact information for inquiries about payments, if any



RA Summary Report

SAMPLE ONLY

County of Los Angeles - Health Agency
Managed Care Services - Financial Services Section
My Health LA (MHLA) - Enrollment and Monthly Grant Funding
February-2019

Print Date May 09, 2019 Contract # H-XXXXXX

Agency Tax_ID PCPID Medical Home Enrollment Primary_MGF Pharmacy_MGF Total_MGF

(Agency Name)

01-Funding Approved-Valid Visit

(Tax ID) (PCPID) (Medical Home Name) (Enrollment) (Site Total)

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(Total Enrollment) (Total MGF Payment)

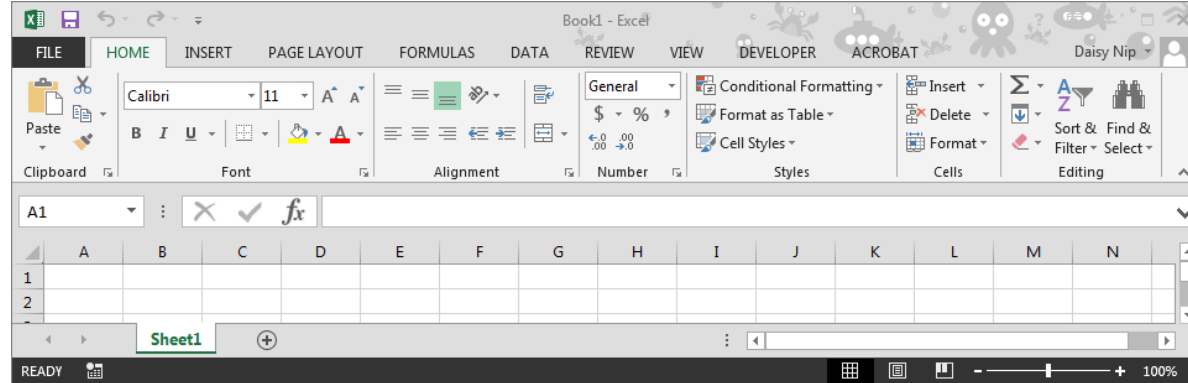
(Agency Name)

Report ID: HLA_F001_M_010

Code	Description
01	Funding Approved – Valid Visit
06	Funding Not Approved – No Valid Visit
04	Retro Adjustment – Application Denied mm/dd/yyyy
05	Retro Funding Adjustment

Participant MGF Detail (Excel File)

- Demographic and enrollment details
- MGF payment status



* For agencies to research MGF payment status

MGF Payment Appeal

- You can appeal any non-payments of a participant.
 - Must complete the appeal form
- AND**
- Must appeal within 30-calendar days after an MGF payment

The MHLA office will respond to the appeal within 30 calendar days upon receiving the appeal form.

- Did you review that the participant is enrolled?
- Was an encounter was submitted into AIA?

MGF Payment Appeal Form

Was this participant enrolled in OEA for the month of inquiry? (Y/N) <u>Please attach a screen shot showing the enrollment dates for this participant.</u>	Was this participant enrolled at your Medical Home during the month of inquiry? (Y/N)	Did this participant have a valid visit in the prior 24 months and was the visit submitted within the submission deadline? (Y/N)	Did you confirm with AIA that the encounter claim for this patient was received (and not rejected) by AIA? (Y/N)

Participant Last Name	Participant First Name	Participant ID#	Participant Date of Birth	What was the participant's enrollment status during the month of inquiry? (i.e., disenrolled, enrolled, denied)	If you believe this participant was disenrolled or denied in error, please explain why.	Please provide the visit date, date submitted to AIA, and CPT code. (See attached for valid visit CPT codes.)		
						Visit Date	Date Submitted	CPT Code

Submitted by: _____ Contact Number: _____

Clinic Billing Manager, COO or CFO Signature: _____ Please Print Manager's Name: _____ Date: _____



MGF Adjustments

MHLA

- Reviews denied applications three times a year
- Analyze whether the MHLA office made an MGF payment on an application that is later denied.
- Adjust your MGF payment to reflect months that should not have been paid

Denied Applications

- Participant did not have coverage
- MGF payments must be returned (from agencies to MHLA).



Reminder:

Check Eligibility and Encounters

Eligibility: check the One-e-App (OEA) Medical Home Summary (MHS) Report to know who is enrolled with your agency. This report is a snapshot in time and is not an enrollment roster.

Encounter: check the AIA encounter portal to know who had a visit.



MHLA

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EDIM Finance Team

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AIA Contact

- 800-303-5242 mention MHLA claim related
- mhlaclinics@mapinc.com



Questions?

My Health LA website

<http://dhs.lacounty.gov/mhla>